PATENT APPLICATION FEE DETERMINATION RECORD
Substitute for Form PTO-875

Application or Docket Number: 09/987901

CLAIMS AS FILED – PART I

FOR	NUMBER FILED (Column 1)		NUMBER EXTRA (Column 2)	SMALL ENTITY RATE	FEE	OR	OTHER THAN SMALL ENTITY RATE	FEE
BASIC FEE (37 CFR 1.16(a))					s150	OR		s 300
TOTAL CLAIMS (37 CFR 1.16(c))	2	minus 20 =	0	x s 25 =		OR	x s 50 =	0
INDEPENDENT CLAIMS (37 CFR 1.16(b))	3	minus 3 =	0	x s 100 =		OR	x s 200 =	0
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))				+ s 180		OR	+ s 360	
				TOTAL		OR	TOTAL	0

* If the difference in column 1 is less than zero, enter "0" in column 2.

CLAIMS AS AMENDED – PART II

1-24-06

AMENDMENT A   RCE

		CLAIMS REMAINING AFTER AMENDMENT (Column 1)		HIGHEST NUMBER PREVIOUSLY PAID FOR (Column 2)	PRESENT EXTRA (Column 3)	SMALL ENTITY RATE	ADDI-TIONAL FEE	OR	OTHER THAN SMALL ENTITY RATE	ADDI-TIONAL FEE
Total (37 CFR 1.16(c))		9	Minus	20	=	x s 25 =		OR	x s 50 =	
Independent (37 CFR 1.16(b))		5	Minus	4	= 1	x s 100 =		OR	x s 200 =	200
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+ s 180 =		OR	+ s 360 =	
						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	200

AMENDMENT B

		CLAIMS REMAINING AFTER AMENDMENT (Column 1)		HIGHEST NUMBER PREVIOUSLY PAID FOR (Column 2)	PRESENT EXTRA (Column 3)	SMALL ENTITY RATE	ADDI-TIONAL FEE	OR	OTHER THAN SMALL ENTITY RATE	ADDI-TIONAL FEE
Total (37 CFR 1.16(c))			Minus		=	x s 25 =		OR	x s 50 =	
Independent (37 CFR 1.16(b))			Minus		=	x s 100 =		OR	x s 200 =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+ s 180 =		OR	+ s 360 =	
						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

AMENDMENT C

		CLAIMS REMAINING AFTER AMENDMENT (Column 1)		HIGHEST NUMBER PREVIOUSLY PAID FOR (Column 2)	PRESENT EXTRA (Column 3)	SMALL ENTITY RATE	ADDI-TIONAL FEE	OR	OTHER THAN SMALL ENTITY RATE	ADDI-TIONAL FEE
Total (37 CFR 1.16(c))			Minus		=	x s 25 =		OR	x s 50 =	
Independent (37 CFR 1.16(b))			Minus		=	x s 100 =		OR	x s 200 =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+ s 180 =		OR	+ s 360 =	
						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

7. *CCE 4/20/04*

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2001

Application or Docket Number: **09/987,901**

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)	SMALL ENTITY TYPE ☐	OR	OTHER THAN SMALL ENTITY

			RATE	FEE		RATE	FEE
TOTAL CLAIMS					OR		
FOR	NUMBER FILED	NUMBER EXTRA	BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS	7 minus 20=	*	X$ 9=		OR	X$18=	
INDEPENDENT CLAIMS	3 minus 3 =	*	X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT ☐			+140=		OR	+280=	
			TOTAL		OR	TOTAL	

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

AMENDMENT A — 4/20/04

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	SMALL ENTITY	OR	OTHER THAN SMALL ENTITY

					RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
Total	7	Minus	20	~	X$ 9=		OR	X$18=	
Independent	3	Minus	3	~	X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐					+140=		OR	+280=	
					TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT B — 8-4-04

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
Total	7	Minus	20	0	X$ 9=		OR	X$18=	
Independent	3	Minus	3	0	X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐					+140=		OR	+280=	
					TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT C — 9/6/05

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
Total	8	Minus	20	~	X$ 9=		OR	X$18=	
Independent	4	Minus	3	L	X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐					+140=		OR	+280=	
					TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

FORM PTO-875 Rev. 8/01